

CALIFORNIA
FORM

460

Date Stamp

FILED

Page 1 of 14

For Official Use Only

JAN 31 2013

CITY OF SANTA MARIA
By: [Signature]
Day Clerk

Type or print in ink.

Recipient Committee
Campaign Statement
Cover Page

(Government Code Sections 84200-84216.5)

Date of election if applicable:

(Month, Day, Year)

Statement covers period

from 10/21/2012

through 12/31/2012

11/06/2012

SEE INSTRUCTIONS ON REVERSE

2. Type of Statement:

- ☐ Preelection Statement
- ☒ Semi-annual Statement
- ☐ Termination Statement
- ☐ Amendment (Explain below)
- ☐ Quarterly Statement
- ☐ Special Odd-Year Report
- ☐ Supplemental Preelection Statement - Attach Form 495

1. Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4.

- ☒ Officeholder, Candidate Controlled Committee
- ☐ State Candidate Election Committee
- ☐ Recall
- ☐ General Purpose Committee
- ☐ Sponsored
- ☐ Small Contributor Committee
- ☐ Political Party/Central Committee
- ☐ Primarily Formed Ballot Measure Committee
- ☐ Controlled
- ☐ Sponsored
- ☐ Primarily Formed Candidate/Officeholder Committee
- ☐ (Also Complete Part 7)

Treasurer(s)

NAME OF TREASURER

Tom Martinez

MAILING ADDRESS

2624 Air Park Dr.

CITY

Santa Maria, CA 93455

NAME OF ASSISTANT TREASURER, IF ANY

Trent Benedetti

MAILING ADDRESS

2151 S. College Dr., Ste. 101

CITY

Santa Maria, CA 93455

OPTIONAL: FAX / E-MAIL ADDRESS

3. Committee Information

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)

Patino for Mayor 2012

I.D. NUMBER

1342307

STREET ADDRESS (NO P.O. BOX)

2624 Airpark Drive

CITY

Santa Maria, CA 93455

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX

CITY

STATE

ZIP CODE

AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

4. Verification

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify

under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on

Date

1-29-13

Executed on

Date

1-31-2013

Executed on

Date

Executed on

Date

Signature of Treasurer

Signature of Assistant Treasurer

Signature of Controlling Officerholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

Signature of Controlling Officerholder, Candidate, State Measure Proponent

Signature of Controlling Officerholder, Candidate, State Measure Proponent

Signature of Controlling Officerholder, Candidate, State Measure Proponent

Signature of Controlling Officerholder, Candidate, State Measure Proponent

Signature of Controlling Officerholder, Candidate, State Measure Proponent

Signature of Controlling Officerholder, Candidate, State Measure Proponent

Signature of Controlling Officerholder, Candidate, State Measure Proponent

Type or print in ink.

COVER PAGE - PART 2

**Recipient Committee
Campaign Statement
Cover Page — Part 2**

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5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE Alice Patino			
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)			
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)		CITY	STATE
2624 Airpark Drive		Santa Maria, CA	93455
ZIP			

Related Committees Not Included in this Statement: *List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or make expenditures on behalf of your candidacy.*

COMMITTEE NAME	I.D. NUMBER		
NAME OF TREASURER	CONTROLLED COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO		
COMMITTEE ADDRESS	STREET ADDRESS (NO P.O. BOX)		
CITY	STATE	ZIP CODE	AREA CODE/PHONE
COMMITTEE NAME	I.D. NUMBER		
NAME OF TREASURER	CONTROLLED COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO		
COMMITTEE ADDRESS	STREET ADDRESS (NO P.O. BOX)		
CITY	STATE	ZIP CODE	AREA CODE/PHONE

6. Primarily Formed Ballot Measure Committee

NAME OF BALLOT MEASURE	
BALLOT NO. OR LETTER	JURISDICTION
<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE	
Identify the controlling officeholder, candidate, or state measure proponent, if any.	
NAME OF OFFICEHOLDER, CANDIDATE, OR PROponent	
OFFICE SOUGHT OR HELD	DISTRICT NO. IF ANY

7. Primarily Formed Candidate/Officeholder Committee *List names of officeholder(s) or candidate(s) for which this committee is primarily formed.*

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE

Attach continuation sheets if necessary

Campaign Disclosure Statement Summary Page

Type or print in ink.
Amounts may be rounded
to whole dollars.

SUMMARY PAGE

Statement covers period

from 10/21/2012

through 12/31/2012

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I.D. NUMBER
1342307

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Patino for Mayor 2012

Contributions Received

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions	Schedule A, Line 3 \$ 8,675.00	\$ 70,202.00
2. Loans Received	Schedule B, Line 3 0.00	25.00
3. SUBTOTAL CASH CONTRIBUTIONS	Add Lines 1 + 2 \$ 8,675.00	\$ 70,227.00
4. Nonmonetary Contributions	Schedule C, Line 3 0.00	8,339.33
5. TOTAL CONTRIBUTIONS RECEIVED	Add Lines 3 + 4 \$ 8,675.00	\$ 78,566.33

Calendar Year Summary for Candidates Running in Both the State Primary and General Elections

	1/1 through 6/30	7/1 to Date
20. Contributions Received	\$	\$
21. Expenditures Made	\$	\$

Expenditures Made

6. Payments Made	Schedule E, Line 4 \$ 10,343.00	\$ 67,671.49
7. Loans Made	Schedule H, Line 3 0.00	0.00
8. SUBTOTAL CASH PAYMENTS	Add Lines 6 + 7 \$ 10,343.00	\$ 67,671.49
9. Accrued Expenses (Unpaid Bills)	Schedule F, Line 3 0.00	0.00
10. Nonmonetary Adjustment	Schedule G, Line 3 0.00	8,339.33
11. TOTAL EXPENDITURES MADE	Add Lines 8 + 9 + 10 \$ 10,343.00	\$ 76,010.82

Expenditure Limit Summary for State Candidates

22. Cumulative Expenditures Made*
(If Subject to Voluntary Expenditure Limit)

Date of Election (mm/dd/yy)	Total to Date
/ /	\$
/ /	\$

Current Cash Statement

12. Beginning Cash Balance	Previous Summary Page, Line 16 \$ 4,989.43
13. Cash Receipts	Column A, Line 3 above 8,675.00
14. Miscellaneous Increases to Cash	Schedule I, Line 4 0.00
15. Cash Payments	Column A, Line 8 above 10,343.00
16. ENDING CASH BALANCE	Add Lines 12 + 13 + 14, then subtract Line 15 \$ 3,321.43

If this is a termination statement, Line 16 must be zero.

*Amounts in this section may be different from amounts reported in Column B.

To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).

17. LOAN GUARANTEES RECEIVED

Schedule B, Part 2	\$ 0.00
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Cash Equivalents and Outstanding Debts

18. Cash Equivalents	See instructions on reverse \$ 0.00
19. Outstanding Debts	Add Line 2 + Line 9 in Column B above \$ 25.00

Schedule A Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A

Statement covers period
from 10/21/2012
through 12/31/2012

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Patino for Mayor 2012

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I.D. NUMBER
1342307

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/22/2012	B & D Farms, Inc. 5912 Oakhill Dr. Santa Maria, CA 93455	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00	500.00	G 12 500.00
10/22/2012	Dennis Bethel & Associates, Inc. 2624 Airpark Dr Santa Maria, CA 93455	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		100.00	200.00	G 12 200.00
10/22/2012	Penny Jenkins 232 E. Canon Perdido Santa Barbara, CA 93101	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Administer	100.00	100.00	G 12 100.00
10/22/2012	EXP 700 Milan Houston, TX 77002-2815	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Oil Industry	500.00	500.00	G 12 500.00
10/22/2012	Santa Barbara County Republican Party 1180 Eugenia Pl. Ste. 220 Carpinteria, CA 93013	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input checked="" type="checkbox"/> PTY <input type="checkbox"/> SCC		200.00	200.00	G 12 200.00
SUBTOTAL \$				1,400.00		

Schedule A Summary

1. Amount received this period - itemized monetary contributions.
(Include all Schedule A subtotals.) \$ 8,600.00

2. Amount received this period - unitemized monetary contributions of less than \$100 \$ 75.00

3. Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) **TOTAL \$** 8,675.00

*Contributor Codes
IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other (e.g., business entity)
PTY - Political Party
SCC - Small Contributor Committee

Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period
from 10/21/2012
through 12/31/2012

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NAME OF FILER
Patino for Mayor 2012
I.D. NUMBER
1342307

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/23/2012	Richard Adam 625 Chapel St. Santa Maria, CA 93454	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Lawyer A California Law Corporation	100.00	200.00	G 12 200.00
10/23/2012	Henri Ardantz 2222 Arrowhead dr Santa Maria, CA 93455	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Agribusiness Betteravia Farms	250.00	550.00	G 12 550.00
10/23/2012	MITCH ARDANTZ 6670 AVILA VALLEY DR San Luis Obispo, CA 93405	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	OWNER BETTERAVIA FARMS	250.00	500.00	G 12 500.00
10/23/2012	MICHAEL BIELY 7325 GRACIOSA RD Santa Maria, CA 93455	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	RAMCO DEVELOPMENT INC	100.00	200.00	G 12 200.00
10/23/2012	Susan Chapman 175 Tepusquet Rd. Sana Maria, CA 93454	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	50.00	150.00	G 12 150.00
SUBTOTAL \$				750.00		

*Contributor Codes
IND - Individual
COM - Recipient Committee
OTH - Other (e.g., business entity)
PTY - Political Party
SCC - Small Contributor Committee

Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>10/21/2012</u>		CALIFORNIA FORM 460
through <u>12/31/2012</u>		
Page <u>6</u> of <u>14</u>		I.D. NUMBER 1342307

NAME OF FILER Patino for Mayor 2012	DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	10/23/2012	Tony Cossa 401 Machado Santa Maria, CA 93455	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Insurance Broker TWIW INSURANCE	100.00	200.00	G 12 200.00
	10/23/2012	East Donovan Lanes 128 East Donovan Rd. Santa Maria, CA 93454	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Rancho Bowl	200.00	450.00	G 12 450.00
	10/23/2012	Engel & Gray, Inc. 745 w. Betteravia Rd. Santa Maria, CA 93456	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		750.00	1,250.00	G 12 1,250.00
	10/23/2012	JOHN MURRAY 312 E LAS FLORES WAY Santa Maria, CA 93454	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	OWNER BRADLEY LAND COMPANY/RANCH BOWL	250.00	500.00	G 12 500.00
	10/23/2012	Urban Planning Concepts, Inc. 2624 Airpark Drive Santa Maria, CA 93455	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		100.00	200.00	G 12 200.00
SUBTOTAL \$					1,400.00		

*Contributor Codes
IND - Individual
COM - Recipient Committee
OTH - Other (other than PTY or SCC)
PTY - Other (e.g., business entity)
SCC - Political Party
SCC - Small Contributor Committee

Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)
CALIFORNIA FORM 460

Statement covers period
from 10/21/2012
through 12/31/2012

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NAME OF FILER

Patino for Mayor 2012

I.D. NUMBER
1342307

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/29/2012	ROBERT IBSEN 1571 EAST MAIN ST Santa Maria, CA 93454	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	DENTIST SELF	100.00	300.00	G 12 300.00
10/29/2012	Ronald Johnson 805 Beth ct Santa Maria, CA 93454	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	50.00	125.00	G 12 125.00
10/29/2012	James Kelly 570 Ranch Rd. Solvang, CA 93463	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	contractor self employed	50.00	150.00	G 12 150.00
10/29/2012	Jerry Luis 430 St. Andrews way Santa Maria, CA 93455	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	100.00	250.00	G 12 250.00
10/29/2012	Santa Ynez Band of Mission Indians P.O. Box 517 Santa Ynez, CA 93460	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		900.00	900.00	G 12 900.00
SUBTOTAL \$				1,200.00		

***Contributor Codes**

IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other (e.g., business entity)
PTY - Political Party
SCC - Small Contributor Committee

Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>10/21/2012</u> through <u>12/31/2012</u>		CALIFORNIA FORM 460
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NAME OF FILER Patino for Mayor 2012		I.D. NUMBER 1342307

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/31/2012	William McInerney 766 Hermosa Vista Way Arroyo Grande, CA 93420	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	VP Finance Tri W Enterprises, Inc	200.00	200.00	G 12 200.00
10/31/2012	Vincent Rodriguez 680 Daniel Dr. Santa Maria, CA 93454	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	1,000.00	1,000.00	G 12 1,000.00
10/31/2012	Deborah William-Hunt 1031 Burlington Santa Maria, CA 93455	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Ex. Vice President Tri W Enterprises, Inc	200.00	200.00	G 12 200.00
10/31/2012	Sharon Williams 2236 S. Broadway Santa Maria, CA 93454	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President Tri W Enterprises, Inc	200.00	200.00	G 12 200.00
11/02/2012	Burt Fugate 2625 S. Miller Ste 107 Santa Maria, CA 93455	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	real estate	250.00	1,000.00	G 12 1,000.00
SUBTOTAL \$				1,850.00		

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IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other (e.g., business entity)
PTY - Political Party
SCC - Small Contributor Committee

Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>10/21/2012</u>		CALIFORNIA FORM 460
through <u>12/31/2012</u>		
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NAME OF FILER		I.D. NUMBER				
Patino for Mayor 2012		1342307				
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
11/02/2012	Western Village 2011 S. Broadway, Suite J Santa Maria, CA 93454	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Shopping Center	2,000.00	2,000.00	G 12 2,000.00
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
SUBTOTAL \$				2,000.00		

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Schedule E Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULEE

SEE INSTRUCTIONS ON REVERSE		Statement covers period from 10/21/2012 through 12/31/2012		CALIFORNIA FORM 460	
NAME OF FILER Patino for Mayor 2012		Page 10 of 14		I.D. NUMBER 1342307	

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Benedetti & Associates, Inc. 2151 S. College Dr Ste 101 Santa Maria, CA 93455	PRO			906.60
MORRISON MEDIA SERVICES PO BOX 5196 Santa Maria, CA 93455	TEL			780.00
MORRISON MEDIA SERVICES PO BOX 5196 Santa Maria, CA 93455	RAD			3,000.00

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$ 4,686.60

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$	10,213.00
2. Unitemized payments made this period of under \$100	\$	130.00
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	\$	0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	TOTAL \$	10,343.00

Schedule E (Continuation Sheet) Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period from 10/21/2012 through 12/31/2012		CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

Patino for Mayor 2012

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
SANTA MARIA SUN 2540 SKYWAY DRIVE, STE A Santa Maria, CA 93455	PRT			968.00
Desiree Menchaca 412 Parkview North Santa Maria, CA 93455	SAL			320.00
Teresa Menchaca 429 El Cerrito Dr. Santa Maria, CA 93455			Reimbursed for Expenses	261.81
Crystal O'Keefe 655 Union Ave. Santa Maria, CA 93455	SAL			260.00
Lanesha Scoby 2027 N. Caballo Way Santa Maria, CA 93458	SAL			250.00

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$

2,059.81

Schedule E (Continuation Sheet) Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period from 10/21/2012 through 12/31/2012		CALIFORNIA FORM 460
		Page 12 of 14

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Patino for Mayor 2012

I.D. NUMBER
1342307

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MITG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSE	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Ryan Wilson 429 El Cerrito Dr. Santa Maria, CA 93455	SAL			100.00
VTC Enterprises 2445 'A' St. Santa Maria, CA 93456	PRT			149.04
LOCAL COPIES 1500 S. BROADWAY Santa Maria, CA 93454	PRT	Flyers		86.45
Desiree Menchaca 412 Parkview North Santa Maria, CA 93455	SAL			30.00
Crystal O'Keefe 655 Union Ave. Santa Maria, CA 93455	SAL			20.00

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$ 385.49

Schedule E (Continuation Sheet) Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period
from 10/21/2012
through 12/31/2012

Page 13 of 14

I.D. NUMBER
1342307

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER
Patino for Mayor 2012

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MEM	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TSE	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	VOT	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	WEB	information technology costs (internet, e-mail)
LIT	campaign literature and mailings	PRT	print ads		

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Laneshia Scooby 2027 N. Caballito Way Santa Maria, CA 93458	SAL		20.00
CORDARY KAREN 1207 TOUCHSTONE LANE SANTA MARIA, CA 93454		Reimbursed for Expenses	128.01
LOCAL COPIES 1500 S. BROADWAY Santa Maria, CA 93454	PRT	Patino for Mayor envelopes	143.10
POLITICAL DATA INC P.O. BOX 59570 Norwalk, CA 90652	PRO		117.99
Boys and Girls Club of Santa Maria 901 N Railroad Ave Santa Maria, CA 93458	CVC	Jackets for Boys and Girls Club	400.00
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.			SUBTOTAL \$ 809.10

Schedule E (Continuation Sheet) Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period

from 10/21/2012

through 12/31/2012

CALIFORNIA
FORM 460

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I.D. NUMBER

1342307

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Patino for Mayor 2012

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc.
CNS campaign consultants
CTB contribution (explain nonmonetary)*
CVC civic donations
FIL candidate filing/ballot fees
FND fundraising events
ND independent expenditure supporting/opposing others (explain)*
LEG legal defense
LIT campaign literature and mailings

MBR member communications
MTG meetings and appearances
OFC office expenses
PET petition circulating
PHO phone banks
POL polling and survey research
POS postage, delivery and messenger services
PRO professional services (legal, accounting)
PRT print ads

RAD radio airtime and production costs
RFD returned contributions
SAL campaign workers' salaries
TEL t.v. or cable airtime and production costs
TRC candidate travel, lodging, and meals
TRS staff/spouse travel, lodging, and meals
TSF transfer between committees of the same candidate/sponsor
VOT voter registration
WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE
(IF COMMITTEE, ALSO ENTER I.D. NUMBER)

John Patino

609 Mill St.

Santa Maria, CA 93458

Benedetti & Associates, Inc.

2151 S. College Dr Ste 101

Santa Maria, CA 93455

CODE OR

Reimbursed for Expenses

PRO

AMOUNT PAID

389.74

1,882.26

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$

2,272.00

FPPC Form 460 (January/05)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

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